## Inventor Information

Inventor One Given Name:: Donald J.
Family Name:: Gagne

Name Suffix::

Postal Address Line One:: 2828 Condit Street

Postal Address Line Two::

City:: St. Paul

State or Province:: MN

Country::

Postal or Zip Code:: 55117 City of Residence:: St. Paul

State or Prov. of Residence:: MN

Country of Residence::

Citizenship Country:: USA

Correspondence Information

Correspondence Customer Number:: 00164
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Application Information

Title Line One:: SINGLE PATIENT USE VEST

Title Line Two::

Total Drawing Sheets:: 6
Formal Drawings?:: Yes
Application Type:: Utility

Docket Number:: A792.12-0026

Licensed US Govt. Agency:: Contract or Grant Numbers::

Secrecy Order in Parent Application?::

Representative Information

Representative Customer Number:: 00164

## Continuity Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application No.::	Filing Date::	Priority Claimed::

Assignee Information

Name::

Address line one:: Address line two::

City::

State or Province::
Postal or zip code::